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as indicated unless correc for maintenance fee notifi		erwise in Block	k 1, by (a) sp	ecifying a ne	w corresponder	nce address; and/or (b) indicat	ing a separate "FEE ADDRESS"
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 28120 ROPES & GRAY LLP One International Place Boston, Massachusetts 02110					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
							(Depositor's name)
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ADDI ICATIONI NO	EH BIG DATE		EIDCENIA	CEN BRIDEN	EOD.	ATTODNIEW DOCKET NO	(Date)
APPLICATION NO.				FIRST NAMED INVENTOR		ATTORNEY DOCKET NO	
09/994,975	11/27/2001	Robin	Robin L. Parsons SSBI-P01-003			2850	
TITLE OF INVENTION	N: VERIFICATION	OF NET ASS	ET VALUES	S			
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE	PUBLICA	ATION FEE	TOTAL FEE(S) DUE	DATE DUE
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Correspondence "Fee Address" ir form PTO/SB/4" Use of a Custon 3. ASSIGNEE NAME A PLEASE NOTE: Unle for recordation as set t (A) NAME OF ASSIGN State Street Corporate	respondence address (o. Address form PTO/SB/1 adication (or "Fee Addrest; Rev 03-02 or more receiver Number is required AND RESIDENCE DATTERS an assignee is identificant in 37 CFR 3.11. Co. NEE	22) attached. ss" Indication ent) attached. A TO BE PRIN ed below, no as empletion of this	attorneys or (2) the nam a registered up to 2 regi name is liste VTED ON TH ssignee data v s form is NO' (E	r agents OR, a ge of a single of the s	firm (having as agent) and the attorneys or ag will be printed. (print or type) a the patent. If a for filing an as	a member 2 mames of gents. If no 3	r, the document has been filed
4a. The following fee(s) are enclosed: 4b. Payment of					Fee(s):		
X Issue Fee	A check in the amount of the fee(s) is enclosed.						
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a. Applicant clai	ms SMALL ENTITY sta	tus. See 37 CF	R 1.27.	b. Applic	ant is no longe	r claiming SMALL ENTITY s	status. See 37 CFR 1.27(g)(2).
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